

SCHIP Section 1115 Waiver Budget Template Revised: 6/6/01 [gross 100 -200% FPG]

	Previous Fiscal Year	Federal Fiscal Year 1	Federal Fiscal Year 2	Federal Fiscal Year 3	Federal Fiscal Year 4	Federal Fiscal Year 5
State's allotment	\$31,861,256	\$37,042,610	\$37,042,610	\$37,042,610	\$37,042,610	\$37,042,610
Funds carried over from prior year(s)	\$46,582,992	\$78,436,857	\$99,723,218	\$74,085,220.00	\$65,984,108.65	\$52,769,400.50
SUBTOTAL (allotment + funds carried over)	\$78,444,248	\$115,479,467	\$136,765,828	\$111,127,830	\$103,026,719	\$89,812,011
Redistributed funds (currently available)						
TOTAL (Subtotal + redistributed funds)	\$78,444,248	\$115,479,467	\$136,765,828	\$111,127,830	\$103,026,719	\$89,812,011
State's enhanced FMAP rate	66.04%	65.78%	65%	65%	65%	65%
COST PROJECTIONS OF APPROVED SCHIP PLAN						
Benefit Costs						
Insurance payments						
Managed care						
per member/per month rate @ # of eligibles						
Fee for Service						
Total Benefit Costs						
(Offsetting beneficiary cost sharing payments)						
Net Benefit Costs	\$11,192	\$10,000	10,000	10,000		
Administration Costs						
Personnel						
General administration						
Contractors/Brokers (e.g., enrollment contractors)						
Claims Processing						
Outreach/marketing costs						
Other						
Total Administration Costs						
10% Administrative Cap						
Federal Share						
State Share						
TOTAL COSTS OF APPROVED SCHIP PLAN	11,192	10,000	10,000	10,000	10,000	10,000

COST PROJECTIONS OF SCHIP DEMONSTRATION PROPOSAL						
Benefit Costs for Demonstration Population #1 (e.g., children)						
Insurance payments						
Managed care						
per member/per month rate @ # of eligibles						
Fee for Service						
Total Benefit Costs for Waiver Population #1						
Benefit Costs for Demonstration Population #2 (e.g., parents)						
Insurance payments						
Managed care		\$26,793,739.00	\$68,749,195	\$76,849,711	\$85,437,129	\$94,633,306
per member/per month rate @ # of eligibles		\$225.85 x 23,727 x 5 mos.	\$233.45 x 24,541 x 12 mos.	\$250.95 x 25,520 x 12 mos	\$269.76 x 26,393 x 12 mos.	\$289.98 x 27,195 x 12 mos.
Fee for Service						
Total Benefit Costs for Waiver Population #2		\$26,793,739.00	\$68,749,195	\$76,849,711	\$85,437,129	\$94,633,306
Benefit Costs for Demonstration Population #3 (e.g., pregnant women)						
Insurance payments						
Managed care						
per member/per month rate @ # of eligibles						
Fee for Service						
Total Benefit Costs for Waiver Population #3						
Total Benefit Costs		\$26,793,739	\$68,749,195	\$76,849,711	\$85,437,129	\$94,633,306
(Offsetting beneficiary cost sharing payments)		\$3,020,791	\$7,967,782	\$8,516,832	\$9,237,178	\$6,426,170
Net Benefit Costs		\$23,772,948	\$60,781,413	\$68,332,879	\$76,199,951	\$88,207,136
Administration Costs						
Personnel						
General administration						
Contractors/Brokers (e.g., enrollment contractors)						
Claims Processing						
Outreach/marketing costs						
Other (specify)						
Total Administration Costs		\$170,000	\$1,109,000	\$1,109,000	\$1,109,000	\$1,109,000
10% Administrative Cap		\$11,547,947	\$13,676,583	\$11,112,783.00	\$10,302,672	\$8,981,201
Federal Share						
State Share						
TOTAL COSTS FOR DEMONSTRATION		23,942,948	\$61,890,413	\$69,441,879	\$77,308,951	\$89,316,136
TOTAL PROGRAM COSTS	11,192	23,952,948	\$61,900,413	\$69,451,879	\$77,318,951	\$89,326,136

Note: Federal Fiscal Year (FFY) 2001 is October 1, 2000 through September 30, 2001.

Note: Currently, expenditures for this population in the MinnesotaCare Program are eligible for federal matching funds at the regular FMAP (50%). At the point in FFY 06 when total eligible expenditures exceed the S-CHIP matching fund available, those excess expenditures will be claimed at the Medicaid rate. The nonfederal share of program expenditures are currently forecasted at the higher rate (50% instead of 35%). Therefore, there should be no concern as to the long term structural balance of this program.